

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837099

FILED
May 01, 2009
Secretary of State

Entity Name: ORAL ROBERTS UNIVERSITY, INC.

Current Principal Place of Business:

7777 S. LEWIS AVENUE
TULSA, OK 74171

New Principal Place of Business:

Current Mailing Address:

7777 S. LEWIS AVENUE
TULSA, OK 74171

New Mailing Address:

FEI Number: 73-0739626 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVENUE
TAMPA, FL 33602 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: GREEN, MART
Address: 7777 S. LEWIS AVENUE
City-St-Zip: TULSA, OK 74171

Title: AT () Delete
Name: ELLSWORTH, DAVID
Address: 7777 S. LEWIS AVENUE
City-St-Zip: TULSA, OK 74171

Title: VC () Delete
Name: WILSON, BILLY
Address: 7777 S. LEWIS AVENUE
City-St-Zip: TULSA, OK 74171

Title: S () Delete
Name: PAYAS, GLENDA
Address: 7777 S. LEWIS AVENUE
City-St-Zip: TULSA, OK 74171

Title: AS () Delete
Name: BAUMGARDNER, MARIAN
Address: 7777 SOUTH LEWIS
City-St-Zip: TULSA, OK 74171

Title: T () Delete
Name: BETZ, JAY
Address: 7777 S. LEWIS AVENUE
City-St-Zip: TULSA, OK 74171

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID ELLSWORTH

AT

05/01/2009

Electronic Signature of Signing Officer or Director

Date